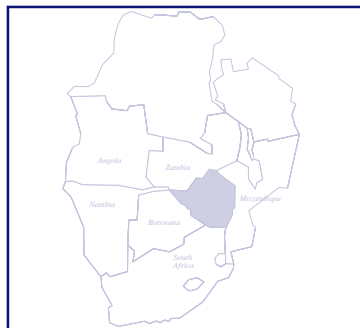


USAID Country Program Brief, October 1998

Family Planning and Health Activities in

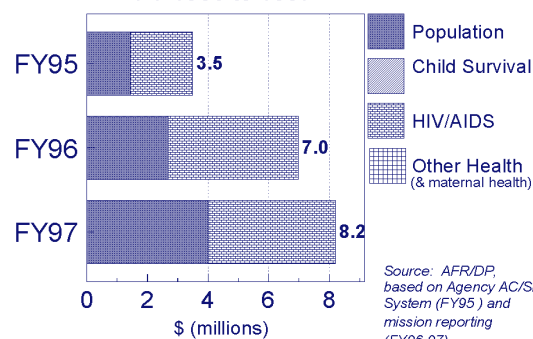
Zimbabwe



| | |
|-----------------------------------|---|
| Population: | 11.7 million (UN estimate for 1997) |
| Infant mortality rate: | 53 deaths per 1,000 births (1994 DHS) |
| Adequate nutrition (wt.-for-age): | 77% of children age 12–23 months (1994 DHS) |
| Total fertility rate: | 4.3 children per woman (1994 DHS) |
| Contraceptive prevalence rate: | 31.1% (all women/modern methods, 1994 DHS) |
| Demographic and Health Surveys: | 1988, 1994, 1999 (planned) |
| Multi-indicator cluster survey: | 1996 (UNICEF) |

USAID/Zimbabwe is the lead donor in family planning efforts in Zimbabwe and has intensified its assistance to promote prevention of human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS). The mission is currently operating under a close-out country strategic plan (CSP) for fiscal years 1997–2003, during which all USAID assistance will be gradually phased out, and plans to end assistance in family planning and health by 2002. The greatest challenge is to ensure that positive effects of USAID programs are sustained beyond the country's graduation, which is scheduled for 2003. A summary of agencywide funding trends for family planning and health activities in Zimbabwe in 1995–97 is provided in the figure. The mission's results framework includes the following strategic objective and intermediate results (IRs) in family planning and health.

Zimbabwe: Total PHN Sector Obligations
FY 1995 to 1997



Strategic Objective 3: Reduce fertility and increase use of HIV/AIDS prevention measures.

IR 3.1: Increase contraceptive use.

IR 3.2: Increase availability and knowledge of proven HIV/STD prevention services.

Activities in Family Planning and Health

Improved Quality of Family Planning. The mission works with public and private providers to increase demand for and quality of family planning services, promoting contraceptive diversity, with emphasis on longer-acting methods, and increased availability to adolescents in particular. USAID is the leading supplier of oral contraceptives in Zimbabwe and recently introduced the female condom. Support to the public sector is being phased out while private sector efforts, particularly those under the PROFIT project, have been intensified.

Contraceptive Supply and Logistics. USAID/Zimbabwe is supporting both the public and private sectors, particularly the parastatal Zimbabwe National Family Planning Council, to address contraceptive supply and management needs. A recently initiated five-year condom social marketing program being implemented by Population Services International (PSI) aims to improve HIV/AIDS prevention. The mission has worked with the Government of Zimbabwe to decentralize all services and to include a greater proportion of the private sector and nongovernmental organizations (NGOs) in efforts to increase availability of contraceptives.

Improved Policies for Reproductive Health. The mission is working with the Government of Zimbabwe to

reduce tariffs on contraceptives and other barriers to reproductive health services and promoting improved policies for HIV/AIDS and associated interventions. The mission also supports improved health care financing mechanisms, particularly cost recovery systems.

Improved Capacity for Service Delivery. The mission is working with the Government of Zimbabwe and NGOs in the health sector to improve their capacity to provide a wide range of reproductive health services. In particular, PACT is implementing a five-year program to bolster NGO capacity to provide expanded and improved HIV/AIDS prevention and counseling services.

Improved Behavior Change Communication. USAID's interventions have supported changes in high-risk behavior in selected occupational groups, including uniformed services, commercial farmers, university students, and factory and transportation workers. The mission is now focusing on women and young adults and seeks to enhance the role that NGOs currently play in behavior change communication efforts. Emphasis has recently been shifted from a strategy based on peer education to facilitating voluntary counseling and testing.

Global Bureau and USAID/Zimbabwe Joint Planning Activities

AIDS Control and Prevention Project has worked with various target groups to:

- Develop an HIV/AIDS prevention program in Bulawayo to increase the adoption of safer sexual behaviors by vulnerable groups, particularly commercial sex workers and their clients;
- Develop prevention interventions in conjunction with other partners targeting high-risk behaviors among defined groups, including rail workers, truckers, and armed forces members and their families;
- Train peer education trainers for a large department store chain; and
- Expand peer education programs and reinforce existing pilot activities involving a single women's association, school children, people living with AIDS, and small businesses.

AVSC International, in conjunction with the Zimbabwe National Family Planning Council, is working to expand the availability of long-term contraception.

Family Health International, in conjunction with the University of Zimbabwe, is conducting a study assessing the impact of contraceptive availability and usage on secondary and college students' vocational and academic pursuits, women's self-esteem, and women's economic decision-making and participation within the workforce, as well as the effects of male attitudes and related gender issues on women's experience with family planning.

Johns Hopkins Program for International Education in Reproductive Health is providing on-site clinical training for health care workers to improve quality of services and is working through the University of Zimbabwe, Department of Obstetrics and Gynecology, to assess the value of certain clinical procedures.

Johns Hopkins University/Population Communication Services

Population Council is working with the Zimbabwe National Family Planning Council to improve its evaluation and research unit and is researching means to integrate sexually transmitted infection information into family planning services more effectively.

SOMARC is working to expand condom distribution to independent distributors and entrepreneurs in areas not covered by the existing system.

SEATS provides training in quality improvement among select family planning service providers.



This USAID Country Program Brief was prepared for the Human Resources Division, Office of Sustainable Development, USAID Africa Bureau (AFR/SD/HRD), by the Center for International Health Information (CIHI). Questions and comments can be directed to CIHI (info@cihi.com).